





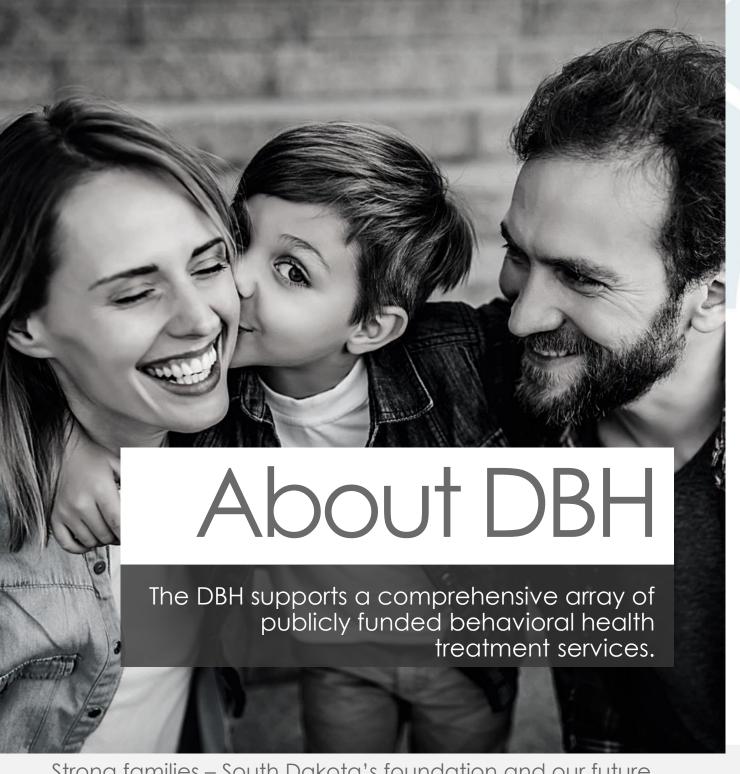
The DBH supports ...

...Children and adults with serious mental illness.

...Adolescents and adults with substance use disorders (SUD).

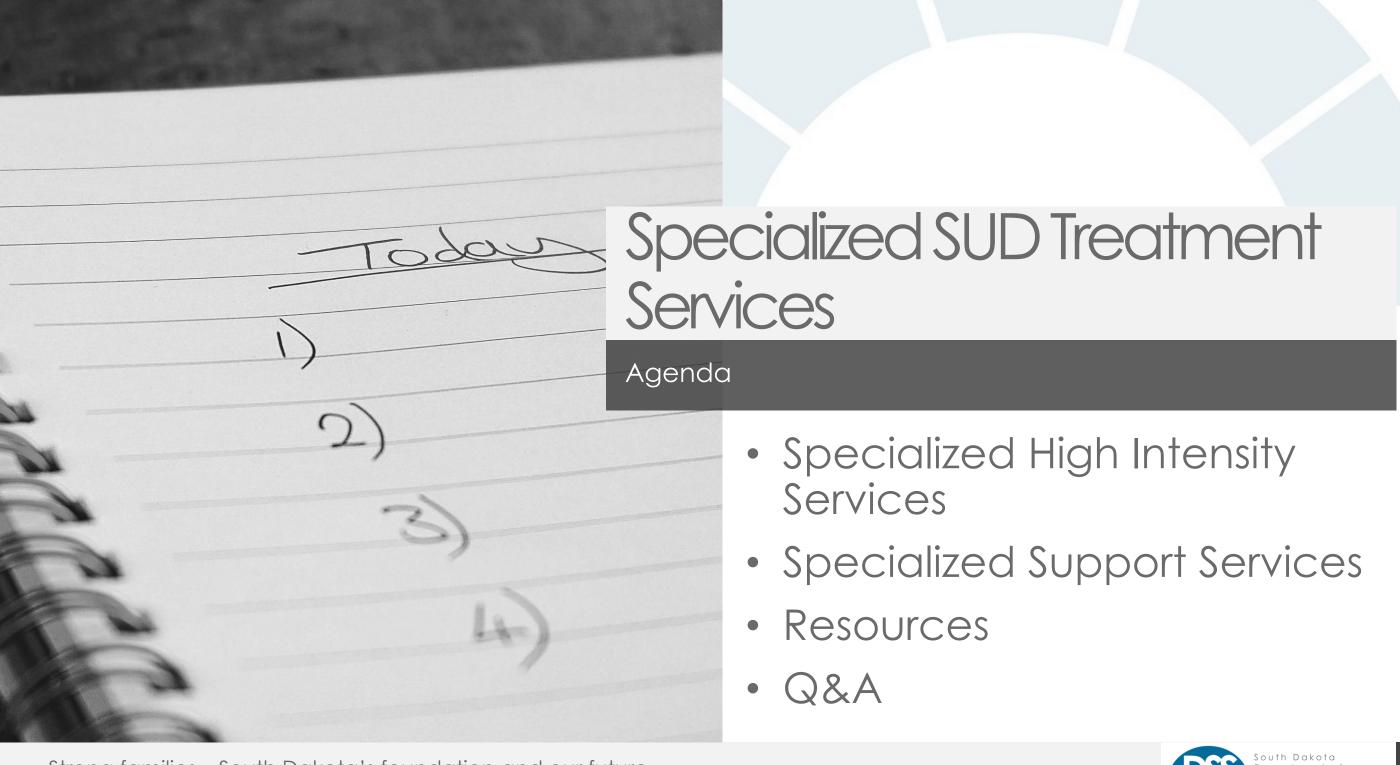
...Youth and young adults in need of prevention services.





Publicly Funded Behavioral Health Treatment Services

- Outpatient mental health services
- Outpatient and inpatient SUD treatment services
- Prevention services



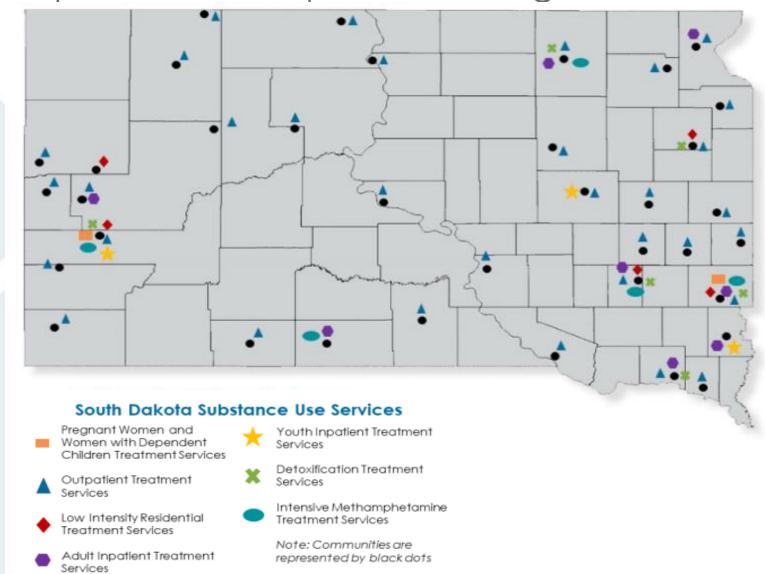


SUD Treatment Services

DBH contracts with SUD treatment providers and prevention agencies to

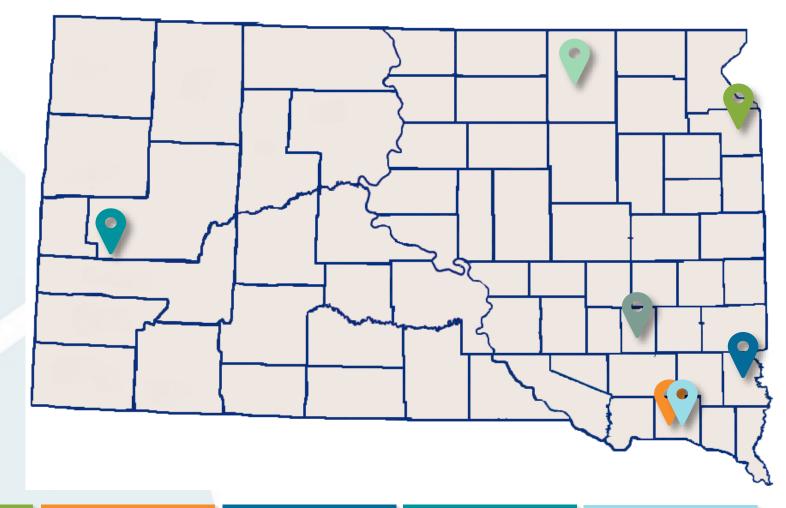
provide the following:

- Outpatient Treatment Services
- Low Intensity Residential Treatment Services
- Inpatient Treatment Services
- Detoxification Treatment Services
- Specialized Services
 - Intensive Methamphetamine Treatment
 - Pregnant Women and Women with Dependent Children Programs
 - Treatment Services for Justice Involved Adults
- Prevention Services



3.7 Intensive Inpatient Treatment Services

- 7 residential facilities across
 South Dakota
- Provide residential services with medically monitored intensive treatment for individuals with severe substance use disorders.
- Individuals receive a minimum of 30 hours of services per week with 9 of those hours being on specialized topics that address the individual's specific needs.
- SUD Treatment Services Brochure



Avera St. Luke's Avera Addiction Care Center

Aberdeen, SD

Dakota Counseling Institute – Stepping Stones

Mitchell, SD

Dakotah Pride Center Sisseton, SD

Human Services
Center
Yankton, SD

Keystone
Treatment
Center

Canton, SD

Compass Point Sturgis, SD

Health Services

Yankton, SD

Lewis & Clark

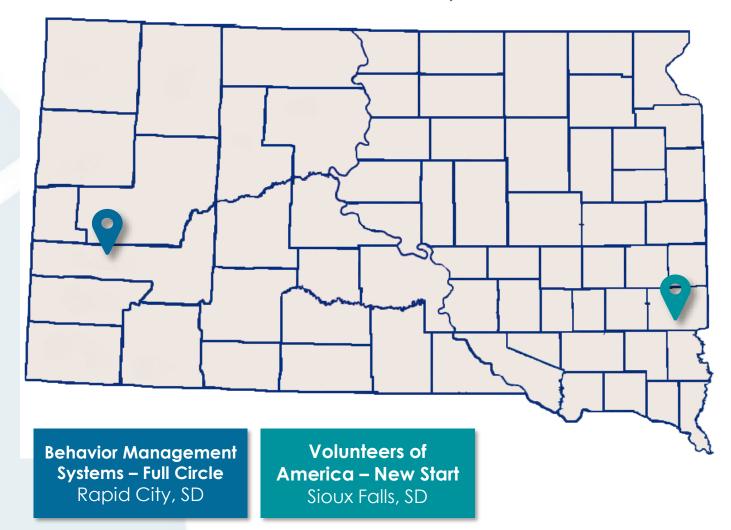
Behavioral



Pregnant Women and Women with Dependent Children Programs

Provide a supportive living environment for women completing substance use disorder treatment, along with their dependent children (0-10 years of age) and obtain the assistance they need to make a successful transition back into their home community.

- Recovery Support Services
 - Wrap around services available to women before admission or after discharge from residential programming
- Low Intensity Residential Services
 - Services in a residential setting that allow residents to maintain employment and community supports while residing in a sober living environment
- Inpatient Services
 - Provides residential services with medically monitored intensive treatment for individuals with severe substance use disorders



Intensive Methamphetamine Treatment (IMT) services

- Provide long-term, evidence-based programming for individuals with severe methamphetamine use disorder.
- The extended programming allows for recovery of cognitive capacity as well as on going case management.
- Treatment may include residential services, outpatient treatment and case management to support long term recovery.

Best Practices for treating individuals with stimulant use disorders:

- Cognitive Behavioral Therapy
- Motivational Interviewing
- Contingency Management
- Community Reinforcement
- IMT Services Brochure

Avera St. Luke's Avera Addiction Care Center

Aberdeen, SD

Carroll Institute

Sioux Falls, SD

Dakota Counseling Institute – Stepping Stones

Mitchell, SD

Glory House

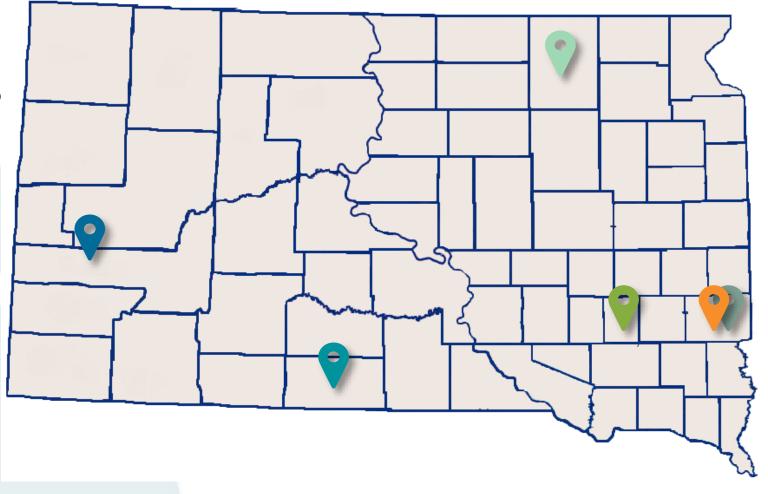
Sioux Falls, SD

PCSO – Addiction Treatment Services

Rapid City, SD

Rosebud Sioux Tribe Treatment

Rosebud, SD





Individuals Seeking Services

How an individual finds help

SUD is a disease which occurs when the recurrent use of alcohol and/or drugs causes significant impairments. Impairments may include health problems, disability and failure to meet major responsibilities at work, school or home.

A trained counselor completes clinical assessment and recommends treatment services based on the assessment.

- Individual and/or referral source contacts a local treatment provider
- A trained clinician completes a clinical assessment
- The trained clinical makes clinical recommendations and refers the individual to treatment services



Role of a Treatment Provider

High Intensity Services Referral Process

Many times, outpatient treatment can meet the individual's needs.

When the disease becomes more severe and causes significant impairments, more intensive services including residential and inpatient treatment can address those needs.

- Trained clinician determines clinical necessity by completing an assessment
- Trained clinician completes the <u>Substance Use</u>
 <u>Disorder High Intensity Referral From and 3rd</u>
 <u>Party Release of Information</u>
- Trained clinician submits the completed forms to the <u>Division of Behavioral Health</u> and South Dakota Foundation for Medical Care (SDFMC) for review



Clinical Necessity Determination Review

Intensive
Inpatient
Treatment
Services Referrals

Information is reviewed by South Dakota Foundation for Medical Care (SDFMC) for clinical necessity If <u>clinical necessity is</u>
<u>determined</u>, SDFMC
collaborates with DBH to
send the referral to the
inpatient treatment provider
and program eligibility screen
is completed in STARS

Referral information sent to DBH

IMT and Pregnant
Women and Women
with Dependent
Children Services
Referrals

Information is reviewed by Division of Behavioral Health for clinical necessity If <u>clinical necessity is not</u> <u>met</u>, SDFMC will communicate with referring agency to notify clinical necessity is not supported and lower level of care is recommended

If <u>clinical necessity is</u>
<u>determined</u>, DBH sends the referral to the appropriate treatment provider and program eligibility screen is completed in STARS when required

If <u>clinical</u> necessity is not met, DBH will communicate with referring agency to notify clinical necessity is not supported and lower level of care is recommended

How is Clinical Necessity is Determined?

The Six Dimensions of ASAM Criteria

The Division of Behavioral Health and the South Dakota Foundation for Medical Care (SDFMC) use the six dimensions of the ASAM Criteria to determine clinical needs.

- What is the ASAM Criteria?
 - The ASAM Criteria is a guide for making clinically appropriate treatment and placement recommendations for individuals with substance use disorders.
- How is the ASAM Criteria Used?
 - The ASAM Criteria provides a thorough multidimensional assessment of the patient's needs in each of the identified six dimensions, across the continuum of care.

The Six Dimensions of ASAM Criteria

DIMENSION ONE

Acute Intoxication and/or Withdrawal Potential

An assessment of an individual's past and current experiences of substance use and withdrawal

DIMENSION TWO

Biomedical Conditions and Complications

An assessment of an individual's health history and current physical condition

DIMENSION THREE

Emotional, Behavioral, or Cognitive Conditions and Complications

An assessment of an individual's thoughts, emotions, and mental health issues

DIMENSION FOUR

Readiness to Change

An assessment of an individual's readiness and interest in changing

DIMENSION FIVE

Relapse, Continued Use, or Continued Problem Potential

An assessment of an individual's health history and current physical condition

DIMENSION SIX

Recovery/Living Environment

An assessment of an individual's recovery or living situations, and the surrounding people, places, and things



How is Clinical Necessity is Determined?

3.7 Intensive Inpatient Clinical Need

To meet clinical need for Intensive Inpatient Services the following criteria must be met (ARSD 67:61:18:01):

- 1. The client shall meet one of the following:
 - The client is experiencing moderate to severe withdrawal or is at risk of severe withdrawal based on previous withdrawal history(Dimension One);
 - b) The client's continued substance use causes imminent risk to biomedical conditions (**Dimension Two**); or
 - c) The client's continued substance use causes imminent risk to emotional, behavioral, and cognitive conditions (**Dimension Three**)

AND

- The client shall meet one of the following
 - a) The client requires intensive monitoring and support to promote progress through the stages of change (**Dimension Four**):
 - b) The client is in immediate danger of continued severe substance use or relapse and such behaviors present significant risk of serious adverse consequences to the client, others, or both (**Dimension Five**); or
 - c) The client's recovery environment poses a threat to safety, engagement in treatment, or both (**Dimension Six**).

The Six Dimensions of ASAM Criteria

DIMENSION ONE

Acute Intoxication and/or Withdrawal Potential

An assessment of an individual's past and current experiences of substance use and withdrawal

DIMENSION TWO

Biomedical Conditions and Complications

An assessment of an individual's health history and current physical condition

DIMENSION THREE

Emotional, Behavioral, or Cognitive Conditions and Complications

An assessment of an individual's thoughts, emotions, and mental health issues

DIMENSION FOUR

Readiness to Change

An assessment of an individual's readiness and interest in changing

DIMENSION FIVE

Relapse, Continued Use, or Continued Problem Potential

An assessment of an individual's health history and current physical condition

DIMENSION SIX

Recovery/Living Environment

An assessment of an individual's recovery or living situations, and the surrounding people, places, and things



How is Clinical Necessity is Determined?

Clinical Necessity is Not Met

If clinical necessity is not met, lower level of care is recommended

- Depending on clinical need one of the following levels of care may be recommended
- These levels of care do not require prior authorization by DBH

Early Intervention Services (Level 0.5)

Early Intervention services offer outpatient services to individuals who may have substance use related problems but are not diagnosed with a substance use disorder.

Dimensions with risk:

Dimension Four Dimension Five Dimension Six

Outpatient Treatment Services (Level 1.0, 2.1, 2.5)

Outpatient treatment services provide counseling services to individuals diagnosed with substance use disorders.

Dimensions with risk:

Dimension One Dimension Three Dimension Four Dimension Five Dimension Six

Low Intensity Residential Treatment Services (Level 3.1)

Services include residential, peer-oriented treatment programs for individuals with substance use disorder (SUD) whose living situation or recovery environment is incompatible with recovery goals. The program provides SUD counseling and case management services.

Dimensions with risk:

Dimension One Dimension Three Dimension Four Dimension Five Dimension Six



- Strategies Supported by State Opioid Response (SOR) Grant
- The SOR grant supports individuals struggling with an opioid use disorder and/or stimulant use disorder.
- Visit the **Avoid** Opioid website site for more information

STRATEGIES SUPPORTING OPIOID AWARENESS, PREVENTION, AND TREATMENT¹



have been treated for opioid addiction by key partners or state-contracted agencies.

Treatment for

Opioid Use Disorder

To learn more, contact the Division of

Behavioral Health at 605-367-5236

Connection to

Resources

For Care Coordination, call the

SD Resource Hotline at 1-800-920-4343

Peer Recovery

Supports

To access services, call the

SD Resource Hotline at 1-800-920-4343

To learn more, contact the Division of

Behavioral Health at 605-367-5236

KEY PARTNERS

· Project Recovery

Health Services

The Helpline Center

· Face It TOGETHER

Project Recovery

Avera Health

· Lewis & Clark Behavioral

Center for Family Medicine

in partnership with South

Dakota State University

Over 10,000 individuals have participated in evidence-based awareness and education programming.

More than 500 individuals had an improved response in their condition after administration of Naloxone by EMS personnel.

STRATEGIES

- · Promote capacity building efforts to develop Medication-Assisted Treatment (MAT) and supporting services, including case management and peer supports.
- Provide training and education for addiction treatment professionals on MAT.
- Develop telemedicine-based MAT services
- · Answer and triage all calls to the SD Resource Hotline (staffed 24/7).
- · Develop and maintain a searchable online database that includes statewide resources for substance use awareness, education, and
- · Connect those seeking assistance to resources through Care Coordination.
- · Provide effective, science-based peer coaching for people living with addiction.
- · Integrate peer recovery support services within MAT clinics and other acute or treatment settings.
- · Increase access to peer coaching through
- · Support expectant and new mothers impacted by opioid or stimulant use through evidence-
- Develop new MAT-friendly recovery homes using the Oxford House model.
- · Establish an Oxford House State Chapter to support new and existing homes.

KEY PARTNERS

- · SD Department of Health, Office of Rural Health
- · Law Enforcement and Emergency Responders statewide
- SD Board of Pharmacy

STRATEGIES

- Host trainings for emergency responders to receive education about recognizing and responding to a suspected opioid overdose.
- · Increase access to naloxone for anyone at risk of an opioid-related overdose
- · Equip emergency responders across SD with NARCAN® for use in a suspected opioid



Training & Education

Overdose Education

& Naloxone Distribution

To learn more, contact the

Office of Rural Health at 605-773-3361

For resources and more information visit AvoidOpioidSD.com/for-providers/

- · Health care systems Addiction treatment professionals and
- agencies Professional associations
- · Increase access to training and education events for professionals who serve populations affected by opioid abuse/misuse Support technical assistance for providers
- seeking to integrate MAT into their practice. Support all state contracted substance use
- disorder treatment agencies in being MAT-



Project ECHO®

To learn more, contact the Division of Behavioral Health at 605-367-5236

Dakota

University of South

- · Build capacity for Project ECHO in South Dakota, which provides a hub-and-spoke knowledge sharing approach where expert teams lead virtual clinics.
- Support continuation of existing ECHO hubs in South Dakota in the areas of addiction medicine and alternative pain management



Public **Awareness**

To learn more visit AvoidOpioidSD.com · Hot Pink, Ink.

KAT Marketing and

Avera Health

- GoodHealthTV⁶
- · Broadcast PSAs and other media statewide, featuring treatment approaches and access.
- Deliver targeted messaging for American Indian youth and adults regarding the dangers of opioid misuse
- Promote opioid awareness and education using targeted social media strategies.



Prevention in Communities

To learn more, contact the Division of Behavioral Health at 605-367-5236

Youth

Prevention

To learn more, contact the Division of

Behavioral Health at 605-367-5236

- · Prevention Resource Centers
- Community-Based Prevention Providers
- Boys and Girls Clubs
- · Institutions of higher education

· Prevention Resource

Community-Based

Boys & Girls Clubs

South Dakota State

University Extension

Prevention Providers

 Provide education on safe disposal strategies for unused or expired medications.

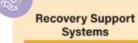
and awareness events in schools and

Deliver evidence-based opioid awareness and

education programming through prevention

- Support communities as they work to address the opioid crisis at the local level.
- Deliver evidence-based opioid awareness and education programming to middle- and high-
- · Partner with after-school programs to integrate evidence-based prevention
- · Create and deliver culturally reflective and age-appropriate educational campaigns





- Bethany Christian
 - Oxford House Inc.
- based specialized case management.





- Medication Assisted Treatment (MAT)
 - Contract with 4 providers that expand access to MAT statewide through officebased and telemedicine-based care.
 - Avera Health
 - Center for Family Medicine in partnership with South Dakota State University
 - Lewis & Clark Behavioral Health Services
 - Project Recovery
- Indigent Medication Program
 - Can be used to cover the costs associated with MAT.
 - Continue to support temporary financial assistance for cost of medications associated with MAT.
 - **Indigent Medication Application**

TREATMENT

for Opioid Use Disorder

OVERVIEW: Expanding access to

Medication-Assisted Treatment (MAT) is a priority for both South Dakota and the nation in combating the opioid crisis. MAT is the use of FDA-approved medications, in combination with counseling and behavioral therapies, to provide a "whole patient" approach to

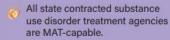
KEY PARTNERS:

- Avera Health
- Project Recovery
- · Lewis & Clark Behavioral Health Services
- · Center for Family Medicine and South Dakota State University (SDSU)
- · South Dakota Association of Addiction and Prevention Professionals (SDAAPP)





More than 950 individuals have engaged in a MAT program at one of the contracted key partners.



More than 100 addiction counselors received training in MAT at the 2018 SDAAPP Fall Conference.

CAPACITY BUILDING EFFORTS TO DATE

Building upon its integrated behavioral health services within inpatient settings, Avera Health is working to expand access to MAT among patients served in outpatient settings through referral linkages and coordinated care across Avera's network to MAT providers via telemedicine. Targeted areas for referral linkages within Avera's network include the OB service line and the pain clinic. Avera is also partnering with Minnehaha County to support MAT services at The Link Community Triage Center in Sioux Falls.

Center for Family Medicine in partnership with South Dakota State University

Building upon its existing education and training program for family medicine residents, pharmacy students, and medical staff, SDSU and Center for Family Medicine increased their training and staff capacity to support a weekly MAT clinic in Sioux Falls.

Lewis & Clark **Behavioral Health Services**

Recognizing a lack of MAT options in their service area, Lewis & Clark Behavioral Health Services created a program centered on expanding its existing comprehensive substance use treatment continuum of care via office-based patient services for MAT. The program expanded access to MAT in 2020 by utilizing telehealth with numerous partners across the state.

Stephen Tamang, MD, began treating addiction through Monument Health in 2017. In 2018, he founded Project Recovery, utilizing technology and evidence-based medicine to treat opioid use disorder. Project Recovery provides office-based MAT in the Rapid City area. Project Recovery also provides services via telemedicine, giving behavioral health professionals statewide access to a waivered medical provider.

www.AvoidOpioidSD.com 1-800-920-4343

To learn more about MAT or to inquire about expanding access in your area, please contact DSS, Division of Behavioral Health at 605-367-5236.



Peer Recovery Supports

- Peer Recovery Support Services are available to provide effective, science-based peer coaching for people living with addiction, including their loved ones.
- Face It TOGETHER offers in-person and virtual sessions to expand reach to individuals across the state.
- In February 2020, one of our contracted MAT providers also began offering Peer Recovery support services.

PFFR RECOVERY **SUPPORTS**

OVERVIEW: Peer Recovery Support Services are available to provide effective, science-based peer coaching for people living with addiction, including their loved ones. South Dakota's peer recovery supports model that of SAMHSA, utilizing Peer Support Workers, or individuals who have been successful in the recovery process. Services are evidence-based, provided by coaches with lived experience.

KEY PARTNERS:

- Face It TOGETHER
- · Project Recovery (for clients engaged in Medication-Assisted Treatment)

More than 550 individuals have engaged in peer recovery coaching services provided by coaches from Face It TOGETHER.



An average of 250 coaching sessions are held on a monthly basis for individuals engaged in Medication-Assisted Treatment at the Project Recovery clinic.

PEER SUPPORT WORKERS

Peer support workers engage in a wide range of activities. These include:

- Advocating for people in recovery
- Sharing resources and building skills
- Building community and relationships
- Leading recovery groups
- Mentoring and setting goals

Peer support roles may also extend to the following:

- Providing services and/or training
- Supervising other peer workers
- Developing resources
- Administering programs or agencies
- Educating the public and policymakers

STRATEGIES

Provide effective, science-based peer coaching for people living with addiction, including loved ones, in office-based settings or via technology.

> Integrate peer recovery support services within Medication-Assisted Treatment clinics and other acute or treatment settings.

Increase access to peer coaching through mobile coaching via secure video or phone that best meets the needs of individuals seeking services.



⑤ Provide financial assistance to cover the cost of coaching for those impacted by opioid or

www.AvoidOpioidSD.com 1-800-920-4343

To learn more or to enroll in Peer Recovery Support Services for you or a loved one, call the South Dakota Resource Hotline at 1-800-920-4343.



Oxford House

- What Makes Oxford House Different?
 - The house is democratically self-run
 - The house membership is responsible for all household expenses
 - The house must immediately expel any member who uses alcohol or drugs.
 - All houses are MAT-friendly
 - All house have naloxone and are trained to administer.
- Future Expansion in South Dakota
 - New Oxford Houses will continue to be opened across South Dakota
 - Each Outreach Worker will open houses in his/her region
 - Cities currently looking to expand to are Rapid City, Aberdeen, Pierre, and Yankton.
- Oxford House Vacancy website



Supported Housing for Addiction Recovery and Empowerment

The Supported Housing for Addiction Recovery and Empowerment (SHARE) program provides structure and support outside of a formal treatment setting including supported housing and related services to individuals 18 and older diagnosed with a substance use disorder or experiencing issues related to substance use, including those with co-occurring mental illness, who due to their challenges, are unable to live independently without additional supports.

- Supportive services must include, at a minimum case management services targeting life domains that have been impacted by the SUD (or substance related issues) and are preventing the individual from living independently.
- In additional, supporting services may include the following
 - direct assistance to obtain basic life necessities
 - assistance to perform daily living activities
 - liaison services
 - employment services
 - other case management services based on the needs of the individual



Brookings

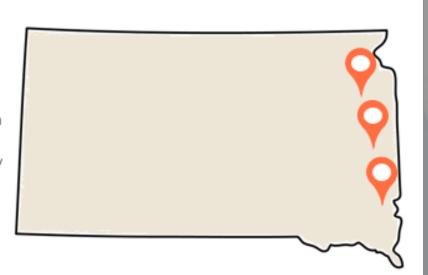
Teen Challenge

Sioux Falls

- Glory House
- Kingdom Boundaries Prison Aftercare Ministry
- Dakota Dream for Recovery
- Southeastern Behavioral Healthcare (SEBHC)

Watertown

 Inter-Lakes Community Action Partnership (ICAP)



- ReNew Program Overview
- Maternal Wraparound and Attachment Parenting Education
 - Serving Recovering Mothers with Newborns
 - ReNew engages expectant mothers and their newborns to attain positive, life-changing behavior.
 - Bethany's ReNew Maternal Wraparound Program (Recovering Mothers with Newborns) is a specialized case management model that supports pregnant women with Substance Use Disorders (SUD) by empowering and equipping them for successful recovery before and after the birth of their child.
 - The model's goals are to promote treatment compliance, maternal health, improve birth outcomes, and reduce the risks and adverse complications of prenatal substance exposure for both mothers and newborns. ReNew integrates evidence-based models and practices across formal systems of child welfare, medical, and substance abuse treatment from pregnancy through the first year of the child's life.







Care Coordination

- Care Coordination provides extra support & follow up care, and can help connect individuals with social support, counseling, treatment options and other services in their area that may be a barrier to recovery.
 - Connect individuals with food assistance, parenting support, childcare, employment, help with scheduling appointments and will provide ongoing support and follow-up for as long as an individual requests.

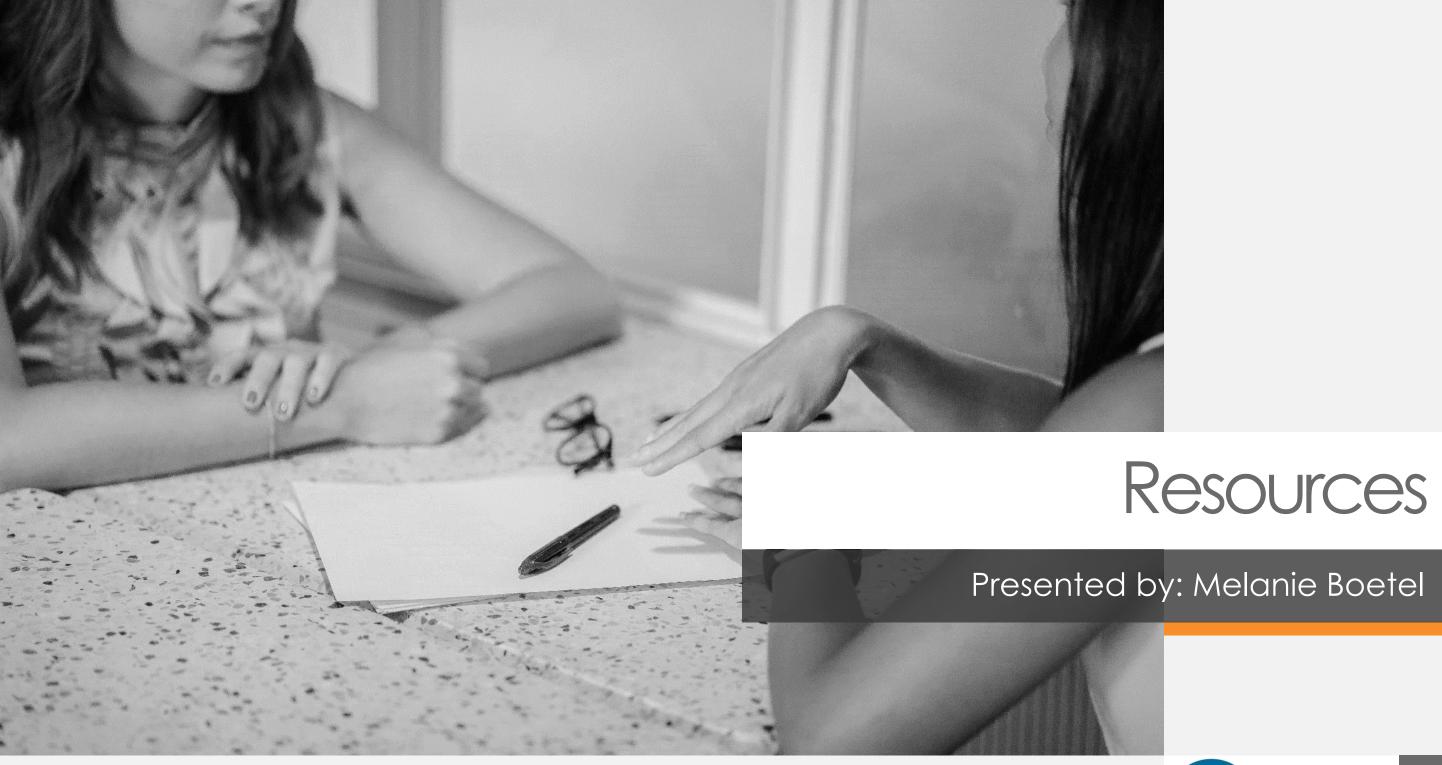
Resource Hotline

- The Resource Hotline is available 24 hours a day, 365 days a year – for free, confidential support, whether you're concerned about yourself or a loved one.
- Strategies
 - Answer and triage all calls to the Resource Hotline (staffed 24/7).
 - Develop and maintain a searchable online database that includes statewide resources for substance use awareness, education, & treatment.
 - Connect those seeking assistance to resources through Care Coordination









How to find treatment services

https://dss.sd.gov/behavioralhealth/agencycounty.aspx

or call the 24/7 Treatment Resource Hotline at 1-800-920-4343

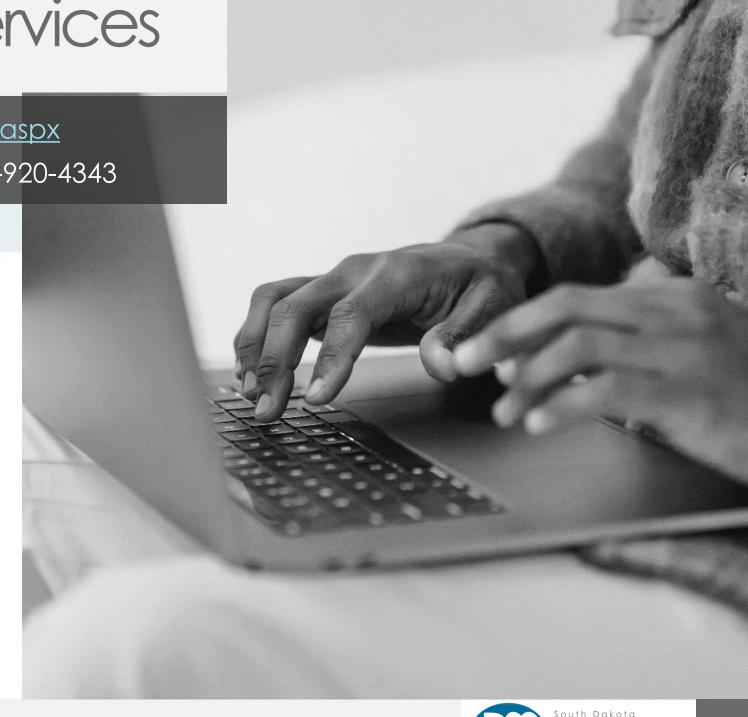
Behavioral Health Services County Map

Mental health and substance use disorder treatment services are available including if you need assistance in paying for services. Click the county nearest to you for contact information or visit the national Behavioral Health Treatment Services Locator.

In an effort to increase access to publicly funded services, the days/hours of substance use disorder providers offering walk-in assessments is provided below.

List of substance use disorder treatment providers offering walk-in assessments





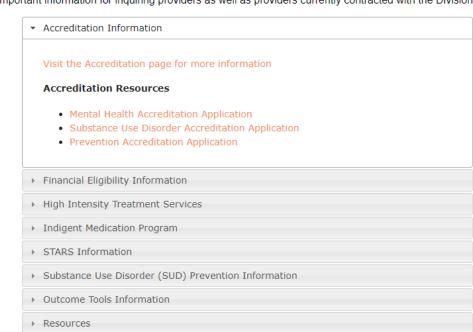
DSS Website Resources

For Providers

- Find information related to Accreditation, Financial Eligibility, High Intensity Treatment Services, STARS Information
- https://dss.sd.gov/behavioralhealth/providers. aspx

Provider Resources

Supporting our provider community is important to the Division of Behavioral Health. Below are links to important information for inquiring providers as well as providers currently contracted with the Division.



For Individuals Seeking Information About Services

- Find information about behavioral health services available, Involuntary Commitment process, and Prevention Services
- https://dss.sd.gov/behavioralhealth/services.a spx

Treatment Services

The Division of Behavioral Health contracts with accredited behavioral health providers across the state to provide quality services to both adults and youth.

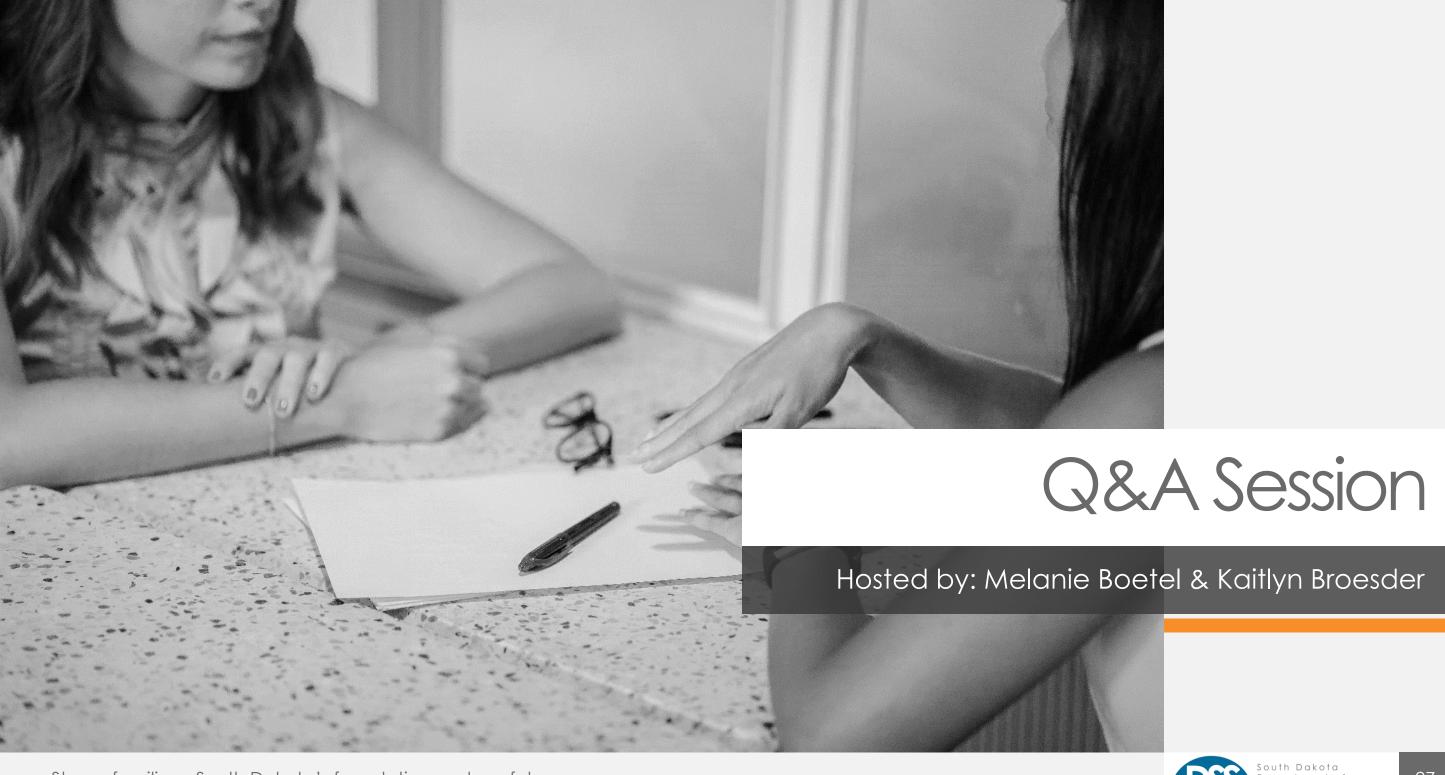
Mental health and substance use disorder treatment services are available including if you need assistance in paying for services. Find services in your area or visit the national Behavioral Health Treatment Services Locater

▼ Mental Health Services

The Division of Behavioral Health contracts with 11 accredited community mental health centers across the state to provide quality services to both adults and youth. Services provided include screenings and assessments, specialized outpatient services, individual therapy, group therapy, and crisis intervention. Funding assistance may be available, contact your local treatment agency for more information. Learn about available mental health services below.

- South Dakota Community Mental Health Center Flyer
- Mental Health Services Brochure
- Justice Involved Services for Youth Flyer
- Substance Use Disorder Services
- → Intensive Methamphetamine Treatment Services
- ▶ Behavioral Health Voucher Program





Question/Answer

Panelists

Specialized High Intensity Services

Intensive Inpatient Services and IMT Services

Name: Kathy Wingert, CAC Agency: DCI - Stepping

Stones

Role: Residential Supervisor

and IMT counselor

Pregnant Women and Women with Dependent Children

Name: Amy Hartman Agency: VOA – New Start Role: Managing Director of Behavioral Health

Specialized Support Services

ReNew Program

Name: Dione Krush and Heidi Thomas

Agency: Bethany Christian

Services

Role: Intensive Case Management Support for pregnant and postpartum women with SUD

Recovery Housing

Name: Mark Wald and Jessica Hromas Agency: Oxford Housing

Medication Assisted Treatment (MAT)

Name: Pam VanMeeteren, Psychiatric Mental Health

Practitioner

Agency: Lewis & Clark
Behavioral Health Services

Resource Hotline/Care Coordination

Name: Taylor Funke, BS, CAC, CPS, CRS and Certified Crisis Worker Agency: Helpline Center

Role: Substance Use Program Manager





Upcoming Webinars

Future Webinar Dates/Topics

- Session 2: <u>Prevention Services</u> August 11, 2021
- Session 3: FY21 Data and Outcomes October 13, 2021
- Session 4: Correctional Behavioral Health December 8, 2021
- Session 5: <u>Behavioral Health Prevalence</u> **Data Overview** February 9, 2022
- Session 6: Mental Health Services April 13, 2022

